OFFICIAL ENTRY FORM

Group of 12 to 20 riders – 6 to 7 hours each day

1 Day - $150.00 2 Days - $225.00 3 Days - $325.00

Add $10.00 for post entry * (20 Rider Maximum)

Private and Semi-Private – each rider per hour

1-Student $85.00 2-Students $70.00 3-Students $65.00

4-Students $60.00 5-Students $55.00 6-Students $50.00

Please Fill Out Completely

Circle one

Bike Size: 50 65 85/150 125 250 450

Skill Level: Beginner Intermediate Expert Pro

Amount of Deposit: $_____ ($50.00 Min. Refundable only if class is canceled – Balance due 7 days before class starts)

Balance Due: $_____

Track or Location:_____

Date of Class:_____ e-mail Address:_____

Name:_____ Age:_____ Phone:_____

Address_____

Street# City State Zip

I hereby declare that it be my intent while at the Motocross School to drive/ride at high speeds and to test my driving/riding skills and to check the performance of the vehicle I am driving/riding.

I affirm that I am going to engage in these potentially dangerous activities of my own volition. I hereby affirm that I enter this school fully aware of the possible hazards to my person and property therein, and I assume all risks and responsibilities upon myself.

I confirm that when I enter this school of Motocross, I do so as a voluntary participant in the activities conducted therein. If I am injured, in any manor, while I am in school I will grant a full and unconditional release of any injuries sustained to my person to all track owners, participant, officials, employees, promoter, instructors or any others who are responsible for the activities in the school.

On behalf of myself, my heirs, executors, or administrators, I agree to hold harmless and indemnify all track owners, participants, officials, employees, promoters, instructors, or others who are responsible for the activities in the school for any damages or injury to my person or property.

READ CAREFULLY BEFORE SIGNING INTO SCHOOL

I HAVE READ THIS ENTRY FORM YES_____ NO_____

IF UNDER 18 YEARS OF AGE, PARENT MUST SIGN_____

RIDER'S SIGNATURE_____DATE_____

**** Students under 18 years of age must be accompanied by parent or legal guardian for the duration of the school ****

Please Mail completed form and deposit to:

OlsenMX
1207 Shirley Rd.
Helena, MT. 59602

Phone: 406.461.8525
e-mail: dean@olsenmx.com